REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05)

(CFA-4) **Summary Sheet**

EILE NUMBER

Indiana Election commission (IC 3-9-5-14)			4647			
INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.			L PAGES IN ENTIRE CFA-4 REPORT 2			
IS THIS AN AMENDMENT? Yes X No		<u> </u>				
	COMMITTEE INFORMATIO	N				
Full name of committee (as on Statement of Organization)	X Check if this is a new nar	me				
Hall, Render, Killian, Heath & Lyman, P.S.C. Politi	cal Action Committee					
2. Acronym or abbreviated name, if any	·					
HRKHL-PAC		(317) 633-4884				
4. Mailing address (address where all campaign finance correspo	chdence is received X Ch	eck if this is a new address				
ONE AMERICAN SQUARE, SUITE 2000, BOX 5. City, state, ZIP code		6. Party affiliation (if applical	2/e)			
INDIANAPOLIS IN 46282		o. r arty anniation (ii approar	,	!		
	ORMATION (For Candidate	's Committee Only)				
7. Full name of candidate (include any nickname)	<u> </u>	8. Party affiliation or if indep	endent			
9. Office sought (include district number, if any. Not required for	exploratory committee.)	10. County of residence				
TYPE OF REPO	DT	CONV	ENTION CANDI	DATES ONLY		
	KI	,,,,,,,,,,,	12. Check one:	DATES ONLT		
11. 			Pre-Con	vention		
Annual			Post-Co	nvention		
12. Reporting period:			OLUMN A	COLUMN B		
	jh: 12/31/2011	Ī	his Period	Year to Date		
13. Cash on hand and investments at the beginning of this repor	ting period.		822.00			
14. Cash on hand and investments January 1, current year.				156.00		
CONTRIBUTIONS AF						
(Note: These amounts include in-kind contributions and loans, a	as well as cash contributions.)					
15a. Itemized (use Schedule A)			0.00	18,750.00		
15b. Unitemized		CUPTOTAL -	0.00	0.00 18,750.00		
15c. Add lines 15a, and 15b in both columns 16. Add lines 13 and 15c in Column A and lines 14 and 15c in C	olumn D	SUBTOTAL	0.00	18,906.00		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in C		TOTAL	822.00	16,906.00		
(Note: These amounts include in-kind expenditures and loan re						
17a. Itemized (use Schedule B) (Public Question: use Schedule			36.00	18,120.00		
17b. Unitemized			0.00	0.00		
17c. Add lines 17a and 17b in both columns		SUBTOTAL	36.00	18,120.00		
18. Cash on hand and investments at close of this reporting peri	od(subtract 17c from 16 in bot	th columns) TOTAL	786.00	786.00		
19. Debts OWED BY the committee (use Schedule D)			0.00			
20. Debts OWED TO the committee (use Schedule E)			0.00			
CERTIFI	CATION		FOR OFF	ICE USE ONLY		
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO T	HE BEST OF MY KNOWLED	GE AND BELIEF IT IS	1			
TRUE, CORRECT AND COMPLETE.			Filed: Or			
Signature of Treasurer	Title	Date	7 1/13/12	9:39 am		
Signature Included	Treasurer	01/13/2012	Chaldy	ا آه . ه		
Signature of Candidate (if applicable)	110000101	Date	1 Juvery	of white		
Signature Included		01/13/2012	I IAN 1	3 2012		
			1 2/14 1	2 ZUIZ		
WARNING: Any information contained in this report may not be (IC 3-9-4-5) A person who knowingly files a fraudulent report contained by the Indiana.	nmits a Class D Felony. (IC 3-		FII	FD		

to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4 SCHEDULE B) Itemized Expenditures

State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind regardless of amount paid to political control to the stransfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER					
4647					
	Page 1 of 1				

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITUR
Code: Operations		Direct	12.00	96.00	10/31/201
National Bank of Indianaplois 107 N. Pennsylvania, Suite 100 Indianapolis IN 46204		Purpose: Service Charge			
Code: Operations		Direct	12.00	108.00	11/30/2011
2 National Bank of Indianaplois 107 N. Pennsylvania, Suite 100 Indianapolis IN 46204		Purpose: Service Charge			
Code: Operations		Direct	12.00	120.00	12/30/2011
3 National Bank of Indianaplois 107 N. Pennsylvania, Suite 100 Indianapolis IN 46204		Purpose: Service Charge			
SUB TOTAL THIS PAGE OF SCHEDULE E		\$ 36.00			
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 36.00		